

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WOUND HEALING AND OROFACIAL CLEFTING, the specification of which

- ☐ is attached hereto.
- ☒ was filed on 29 June 2001 as United States Application No. 09/869,564.
- ☒ was filed on 6 January 2000 as International Application No. PCT/GB00/00003.
- ☐ and was amended on _____ (if applicable).
- ☐ with amendments through _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56. If this is a continuation-in-part application filed under the conditions specified in 35 U.S.C. § 120 which discloses and claims subject matter in addition to that disclosed in the prior copending application, I further acknowledge the duty to disclose material information as defined in 37 C.F.R. § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) on which priority is claimed:

Prior Foreign Application(s)

Priority
Claimed

9900167.9
(Number)

United Kingdom
(Country)

6 January 1999
(Day/Month/Year Filed)

☒
Yes

☐
No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Application Number

Filing Date

09869564 - 401001

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

PCT/GB00/00003
(Application No.)

6 January 2000
(Filing Date)

Pending
(Status: patented,
Pending, abandoned)

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from Harrison Goddard Foote as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

I hereby appoint the practitioners associated with the customer number provided below to prosecute this application, to file a corresponding international application, and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number



24197
KSCLW

Name	Reg. No.	Name	Reg. No.
BLYVEIS, Deborah B.	<u>47,337</u>	PETERSEN, David P.	<u>28,106</u>
CALDWELL, Lisa M.	<u>41,653</u>	POLLEY, Richard J.	<u>28,107</u>
GIRARD, Michael P.	<u>38,467</u>	RINEHART, Kyle B.	<u>47,027</u>
HAENDLER, Jeffrey B.	<u>43,652</u>	RUPERT, Wayne W.	<u>34,420</u>
HARDING, Tanya M.	<u>42,630</u>	RYBAK, Sheree L.	<u>47,913</u>
JAKUBEK, Joseph T.	<u>34,190</u>	SCOTTI, Robert F.	<u>39,830</u>
JONCUS, Stephen J.	<u>44,809</u>	SIEGEL, Susan Alpert	<u>43,121</u>
JONES, Michael D.	<u>41,879</u>	SLATER, Stacey C.	<u>36,011</u>
KLARQUIST, Kenneth S.	<u>16,445</u>	STEPHENS Jr., Donald L.	<u>34,022</u>
KLITZKE II, Ramon A.	<u>30,188</u>	STUART, John W.	<u>24,540</u>
LEIGH, James S.	<u>20,434</u>	VANDENBERG, John D.	<u>31,312</u>
MAURER, Gregory L.	<u>43,781</u>	WHINSTON, Arthur L.	<u>19,155</u>
NOONAN, William D.	<u>30,878</u>	WIGHT, Stephen A.	<u>37,759</u>
ORR, David E.	<u>44,988</u>	WINN, Garth A.	<u>33,220</u>

Address all telephone calls to William D. Noonan, M.D. at telephone number (503) 226-7391.

Address all correspondence to:

Customer Number



24197
KSCLW

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

28
100707-4955955

Full Name of First Inventor:

Alexander Fred Markham

1-10 Inventor's Signature

A Markham

1st SEPTEMBER 2001
Date

Residence: Leeds, United Kingdom CBX

Citizenship: UNITED KINGDOM

Post Office Address: Molecular Medicine Unit, Clinical Sciences Building, St. James's University Hospital,
Leeds LS9 7TF, UNITED KINGDOM

200 Full Name of Second Inventor:

David Bonthron

Inventor's Signature

David Bonthron

3rd Sept 2001
Date

Residence: Leeds, United Kingdom CBX

Citizenship: UNITED KINGDOM

Post Office Address: Molecular Medicine Unit, Clinical Sciences Building, St. James's University Hospital,
Leeds LS9 7TF, UNITED KINGDOM

09869964-101001